

WILLIAM F. WELD Governor ARGEO PAUL CELLUCCI Lt. Governor

# COMMONWEALTH OF MASSACHUSETTS EXECUTIVE OFFICE OF ENVIRONMENTAL AFFAIRS DEPARTMENT OF ENVIRONMENTAL PROTECTION METROPOLITAN BOSTON - NORTHEAST REGIONAL OFFICE

TRUDY COXE Secretary

DAVID B. STRUHS Commissioner

### NPDES FACILITY INSPECTION FORM

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MUNICIPALITY ROUSE	pe NAME OF FACILITY Clobal South Terminal
FACILITYADDRESS 40	7/96 Lee Burbank PHONE 781-398-4150 Hay
TYPE OF INDUSTRIAL P	ROCESSES
GASULINE 01	2- dresel tark Barm
SURFACE DISCHARGE_	GROUNDWATER DISCHARGE
PRETREATMENT TO SE	WER
	Mystic River Chelses River
TYPE OF TREATMENT	
	PRETREATMENT
	SANITARY WASTE TREATMENT
HARBURS Clean	OIL/WATER SEPARATOR ONE SEPARATUR
ely	INDUSTRIAL WASTE TREATMENT
	OTHER (SPECIFY)
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## NPDES INSPECTION DATE SHEET

## BUREAU OF WASTE PREVENTION

PERMIT NUMBER MA 6000 825 INSI  FACILITY NAME Clobal South Term  INSPECTION TYPE (CIRCLE ONE)  A PERFORMANCE AUDIT B COMPLIANCE BIOMONITORING C COMPLIANCE EVALUATION	FACILITY TYPE  1 MUNICIPAL (2) INDUSTRIAL 3 AGRICULTURAL 4 FEDERAL
D DIAGNOSTIC E CORP OF ENGINEERS INSPECTION F PRETREATMENT FOLLOW-UP G PRETREATMENT AUDIT H FOLLOW-UP INSPECTION I INDUSTRIAL USER INSPECTION L ENFORCEMENT CASE SUPPORT P PRETREATMENT COMPLIANCE INSPECTION R RECONNAISANCE S COMPLIANCE SAMPLING U IND. USER INSP. W/ PRETREATMENT AUDIT X TOXICS INSPECTION	BIO MONITORING  D DISCRETE METHOD  F FLOW-THROUGH METHOD  QA DATA BASE INSPECTION  Q BASED ON QA-DMR
INSPECTION COMMENTS	PHONE 977. 694.327.3

FACILITY EVALUATION:	S: SATISFACTORY;		U: UNSATISAFCTORY;	
	N/A: NOT APPL	CABLE;	DEF: DEFICIENT	
PARAMETER EVALUATED	S	U	N/A	DEF
EFFLUENT MEETS PERMIT REC'	D	981		
RECORDS & REPORTS	* 2			
PERMIT VERIFICATION	,		a s	
OPERATION & MAINTENANCE	5			
FLOW MEASUREMENT				
SAMPLING PROCEDURES				
LABORATORY PROCEDURES				
			7 Mg	
EFFLUENT/RECEIVING WATER	OBSERVATION	S:		
OIL SHEEN TURBID	ITY CLEAR	FLOATING	S SOLIDS NO	<u> </u>
ODORVISIBLE	FOAM/NO	COLOR (	Vea/ROTHER(	6000
	•			
STATE INSPECTOR(S)	mills	TITLE	EA111	
DATE OF INSPECTION	8/24/18	1/21/18		
FACILITY REPRESENTATIVE(S)_	Carlos	cas	71260	
TITLE TERMINAL MOR	PHONE	617-	874-6844	1
MAILING ADDRESS (IF DIFFERE				
observations: Clear 14	so being	des	chayed i	t.
. Reveo this	time			